



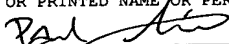
11-17-03

1632

AMENDMENT TRANSMITTAL LETTER		CLIENT-MATTER NO.: 56548-014	
SERIAL NO: 10/034,882	FILING DATE: December 27, 2001	EXAMINER: A. Chakrabarti	GROUP ART UNIT: 1634 CONFIRMATION NO.: 2031
INVENTION: METHODS OF IDENTIFYING OPTIMAL DRUG COMBINATIONS AND COMPOSITIONS THEREOF			

TO: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"
"EXPRESS MAIL" MAILING LABEL NUMBER: EV 400 553 226 US
DATE OF DEPOSIT: November 14, 2003
I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED
WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST
OFFICE TO ADDRESSEE" SERVICE 37 C.F.R. 1.10 ON THE DATE
INDICATED ABOVE, AND IS ADDRESSED TO: COMMISSIONER FOR
PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

Paul Choi
(TYPED OR PRINTED NAME OR PERSON MAILING PAPER OR FEE)

(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is a Response to the Office Action mailed August 14, 2003, with Exhibits A and B, in the above-identified application.

- ☐ Small Entity status of this application has been established under 37 CFR 1.27.
- ☐ Petition for Extension of Time is enclosed (in duplicate).
- ☐ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMEND- MENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
						SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	59	- 59	-	0	x	\$9	\$18	=	\$	\$0.00
INDEPEN- DENT CLAIMS	16	- 16	-	0	x	\$42	\$84	=	\$	\$0.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			YES	X NO		\$140	\$280	=	\$	\$0.00
						TOTAL ADDITIONAL FEE			\$	\$0.00

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

☐ Please charge my Deposit Account No. 502624 the amount of \$_____, \$ of which covers the fee for a -month extension of time. A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

Inventor: Dale R. Pfost
Serial No.: 10/034,882
Filed: December 27, 2001
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X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



Astrid R. Spain
Registration No. 47,956

McDERMOTT, WILL & EMERY
4370 La Jolla Village Drive
Suite 700
San Diego, California 92122
858-535-9001

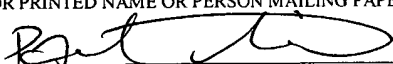


Appl. No. : 10/034,882
Applicant : Dale R. Pfof
Filed : December 27, 2001
TC/A.U. : 1634
Examiner : Arun Chakrabarti
Docket No. : 56548-014

Confirmation No. 2031

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Paul Choi
(TYPED OR PRINTED NAME OR PERSON MAILING PAPER OR FEE)

(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

RESPONSE TO OFFICE ACTION

Responsive to the Office Action mailed August 14, 2003, Applicant respectfully requests consideration of the following remarks.

Current listing of claims begins on page 2 of this paper.

Remarks begin on page 14 of this paper.